

MONTANA STATE HOSPITAL FORENSIC MENTAL HEALTH FACILITY POLICY AND PROCEDURE

PROVISION OF DIETARY SERVICES FOR THE FORENSIC MENTAL HEALTH FACILITY

Effective Date: February 1, 2016 Policy #: MSH FMHF-18

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- **I. PURPOSE:** To establish guidelines to ensure meal distribution and supplement service.
- **II. POLICY:** To provide nutritionally adequate meals and supplemental food supplies.
- III. **DEFINITIONS:** None
- IV. RESPONSIBILITIES:
 - A. Contract dietary Services will be responsible for meal distribution.
 - B. Licensed Independent Practitioner (LIP) is responsible for patient diet orders.

V. PROCEDURE:

A. General Meal Distribution

- 1. A meal will be offered to each patient three (3) times daily. These meals will be identified as breakfast, lunch and dinner.
- 2. Patient meals will be prepared and served according to LIP order and dietitian formulated menu. General diets will be procured and served to appropriate patients and for all staff. Therapeutic diets will be prepared by trained diet cooks and served correspondingly.
- 3. Meals are packaged according to service requirement. These include, but are not limited to, individualized trays, cafeteria style and suitable packaging for night shift staff.
- 4. The most critical elements of food distribution are time and temperature. Foods will be transported and served as close to preparation time as possible. Maximum cold food temperatures will be 41° F and minimum hot food temperatures will be 135° F at time of service.
- 5. Meals will be served at the Central Dining Room, or transported to pods depending on patient need.

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B. Supplemental Food Orders

- 1. Each pod may submit a weekly store order to request additional food supplies. This order will be received by FMHF Dietary Services by each Friday. and deliveries will occur on assigned days the next week:
 - Monday A-Pod
 - Wednesday B-Pod
 - Thursday C-Pod
 - Friday D-Pod

Food supplies will be provided as available through purchase. Quantities will be determined by unit census. These food supplies include but are not limited to:

- a. graham crackers
- b. saltine crackers
- c. fresh fruit
- d. decaffeinated coffee
- e. tea bags
- f. sugar
- g. sugar substitute
- h. salt
- i. fruit juice
- 2. Requests for alternative food supplies will be considered on an individual basis.

C. Non-Patient Events

- 1. Non-patient events will be reviewed and authorized as appropriate by the FMHF Dietary Services management.
 - a. Administration will be allocated coffee and related condiments as requested via store order.
 - b. In-house catering must follow previously listed guidelines.
- VI. REFERENCES: JCAHO Care of Patients (TX) Standards; ARM 37-106-1624.
- **VII. COLLABORATED WITH:** Food Service Manager, Clinical Service Director, Program Manager, Medical Director and Hospital Administrator, CCCS Food Managers.
- **VIII. RESCISSIONS:** None, new MSH FMHF policy #
- **IX. DISTRIBUTION:** All MSH FMHF policy manuals.

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- **X. ANNUAL REVIEW AND AUTHORIZATION:** This policy is subject to annual review and authorization for use by either the Administrator or the Medical Director with written documentation of the review per M.C.A. § 307-106-330.
- XI. FOLLOW-UP RESPONSIBILITY: Dietary Services Manager

XII. ATTACHMENTS: None.

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John Glueckurt	Date	Thomas Gray, MD	Date
Hospital Administrator		Medical Director	